PTO/SB/17 (10-08)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE to a collection of information unless it discloses a white ALIS and the Collection of Information unless it discloses a white ALIS and the Collection of Information unless it discloses a white ALIS and the Collection of Information unless it discloses a white ALIS and the Collection of Information unless it discloses a white ALIS and the Collection of Information unless it discloses a white ALIS and the Collection of Information unless its angle of of In

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Number 10/814,198-Conf. #6429				
FEE TRANSMITTAL				Filing Date April 1, 2004				
				First Named Inv	entor	Kyoung Ro YOON		
For FY 2009				Examiner Name		M. P. Choi		
Applicant claims small entity status. See 37 CFR 1.27				Art Unit	2621	1		
TOTAL AMOUNT OF PAYMENT (\$) 810.00				Attorney Docket No. 3449-03			117PUS1	
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17								
FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
	FIL	.ING FEES Small Entity	SEAF	RCH FEES Small Entity	EXAMI	NATION FEES Small Entity		
Application Type	Fee (\$	Fee (\$)	ce (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees F	Paid (\$)
Utility	330	165	540	270	220	110		
Design	220	110	100	50	140	70		
Plant	220	110	330	165	170	85		
Reissue	330	165	540	270	650	325		
Provisional	220	110	0	0	0	0		
2. EXCESS CLAIM FE	ES							Small Entity
								Fee (\$) 26
Each independent claim over 3 (including Reissues)						220	110	
Multiple dependent claims							390	195
Total Claims	Fee	Paid (\$)	M	lultiple Depende	nt Claims			
19 - 20 or HP x =					Fee (\$) Fee Paid (\$)			
HP ≈ highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)								
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)								
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size feed us is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(e)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
-100 = /50 = (round up to a whole number) x = (4. OTHER FEE(S) Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 810.00								
SUBMITTED BY	0 00	COC	\ Te	egistration No.				
Signature	- Collective 10				40,953	Telephone	(703) 205	
Name (Print/Type) Esthe	er H. Chong	()				Date (October 1	9, 2009